

10/732822

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.		FILING DATE			
							APPLICANT(S)					
							CLAIMS					
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT								
IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP
1	/						51	/				
2	/						52	/				
3	/						53	/				
4	/						54	/				
5	/						55	/				
6	/						56	/				
7	/						57	/				
8	/						58	/				
9	/						59	/				
10	/						60	/				
11	/						61	/				
12	/						62	/				
13	/						63					
14	/						64					
15	/						65					
16	/						66					
17	/						67					
18	/						68					
19	/						69					
20	/						70					
21	/						71					
22	/						72					
23	/						73					
24	/						74					
25	/						75					
26	/						76					
27	/						77					
28	/						78					
29	/						79					
30	/						80					
31	/						81					
32	/						82					
33	/						83					
34	/						84					
35	/						85					
36	/						86					
37	/						87					
38	/						88					
39	/						89					
40	/						90					
41	/						91					
42	/						92					
43	/						93					
44	3						94					
45	3						95					
46	3						96					
47	3						97					
48	3						98					
49	3						99					
50	3						100					
TOTAL IND.							TOTAL IND.					
TOTAL DEP.							TOTAL DEP.					
TOTAL CLAIMS							TOTAL CLAIMS					